

In The United States Court of Federal Claims

Cover Sheet

Plaintiff(s) or Petitioner(s)

20-859 L

Names: Mandan, Hidatsa, and Arikara NationLocation of Plaintiff(s)/Petitioner(s) (city/state): New Town, North Dakota

(If this is a multi-plaintiff case, pursuant to RCFC 20(a), please use a separate sheet to list additional plaintiffs.)

Name of the attorney of record (See RCFC 83.1(c)): Timothy Q. PurdonFirm Name: Robins Kaplan LLP

Contact information for pro se plaintiff/petitioner or attorney of record:

Post Office Box:

Street Address:

City-State-ZIP:

Telephone & Facsimile Numbers:

E-mail Address:

1207 West Divide Ave, Suite 200Bismarck, ND 58501T: 701-255-3000, F: 612-339-4181TPurdon@RobinsKaplan.com

Is the attorney of record admitted to the Court of Federal Claims Bar?



Yes



No

Nature of Suit Code: 504

Select only one (three digit) nature-of-suit code from the attached sheet.

Agency Identification Code: DOINumber of Claims Involved: 4Amount Claimed: \$ 200,000,000+

Use estimate if specific amount is not pleaded.

Bid Protest Case (required for NOS 138 and 140):

Indicate approximate dollar amount of procurement at issue: \$ _____

Is plaintiff a small business?



Yes



No

Was this action preceded by the filing of a protest before the GAO?



Yes



No

GAO Solicitation No. _____

If yes, was a decision on the merits rendered?



Yes



No

Income Tax (Partnership) Case:

Identify partnership or partnership group: _____

Takings Case:

Specify Location of Property (city/state): _____

Vaccine Case:

Date of Vaccination: _____

Related Case:

Is this case directly related to any pending or previously filed case(s) in the United States Court of Federal Claims? If yes, you are required to file a separate notice of directly related case(s). See RCFC 40.2.



Yes



No